

## The Role of Politeness Strategies in Psychotherapy Evidence from Client-Therapist Interactions

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**Abstract.** *This paper explores the usage of politeness strategies in psychotherapy sessions and their importance in establishing rapport and trust between therapists and clients. Based on a series of recorded and transcribed therapy sessions, this research uses qualitative analysis based on Brown and Levinson's (1978) politeness theory. It looks at how therapists negotiate face-threatening acts while maintaining empathetic and supportive interactions. It points out that the highest-ranking positive politeness strategies employed by therapists tend toward emphasis of solidarity and the establishment of a view by the client, whereas on the other hand, the most commanding negative ones involve hedging and making indirect requests for the need to not impose on a client's freedom. These may differ across therapy settings, different phases, or with respect to a client's condition. The study also showed that the linguistic choices importantly impact the development of therapeutic relationships and stressed the necessity of pragmatic competence in the clinical setting. This paper discusses implications for therapist training, the need for further research into cross-cultural differences in politeness strategies.*

**Key words:** Psychotherapy, therapist, politeness, Brown and Levinson.

### 1. Introduction

Effective communication is essential in psychotherapy, where language is the main tool for understanding, supporting, and guiding clients on their mental health journeys (Hill & Knox, 2009). In this context, therapists' use of politeness strategies is crucial for creating a safe and supportive environment, building trust, and encouraging open dialogue. Politeness strategies are those linguistic means reflecting the speaker's care for the social tact and face-saving of the interlocutors. This tact is of greatest importance when discussing delicate problems with clients while preserving their self-determination and dignity. According to Spencer-Oatey (2008) though extremely important, politeness strategies in psychotherapy have not been given much attention in pragmatic research.

The bulk of research into therapist-client communication focuses either on therapeutic techniques or outcomes, with relatively little attention to how linguistic choices subtly shape the therapeutic relationship (Heritage & Robinson, 2006). Such an oversight is particularly unfortunate in the case of psychotherapy, where inappropriate linguistic approaches might disrupt rapport or even damage the therapeutic alliance. For example, an utterance that is stylistically too direct may be felt as intrusive, while too much hedging can undermine the therapist's credibility and authority. The problem that this study tries to address is the lack of systematic analysis with regard to the use of politeness strategies in psychotherapy sessions in managing face-threatening acts and negotiating the power relationship between therapists and clients.

It specifically investigates how therapists use positive politeness strategies, such as showing empathy and acknowledging the client's experience, and negative politeness strategies, such as minimizing imposition and respecting autonomy, in order to achieve therapeutic goals. This study attempts to add empirical support to the pragmatic mechanisms underlying effective psychotherapy by examining real-life interactions between clients and therapists. In short, these will add to an understanding of the way in which politeness strategies could go along with building an empathic and enabling therapy atmosphere; this should again improve mental health care overall.

## **2. Literature Review**

Politeness strategies are linguistic devices used to manage social interactions and maintain harmony by attending to the "face" needs of interlocutors, as explained in Brown and Levinson's seminal politeness theory (1987). These strategies are broadly classified into positive politeness (focused on enhancing connection and solidarity) and negative politeness (aimed at respecting autonomy and minimizing imposition). In psychotherapy, the interaction involves very personal and often sensitive issues; thus, the usage of these strategies is important to maintain trust and rapport. (Ahmadi & Weisi, 2023).

### **2.1 Politeness Strategies in Therapeutic Communication**

Research in therapeutic discourse has long recognized linguistic sensitivity. For McCabe and Priebe (2004), effective therapist communication requires both technical competence and interpersonal skills, including the use of language that affirms and supports the client. Indeed, politeness strategies are crucial for these interpersonal skills in helping the therapists balance the dual imperatives of addressing clients' psychological challenges without being threatening and hostilely non-empathetic.

#### **2.1.1 Positive Politeness Strategies**

Positive politeness strategies are employed to minimize social distance and emphasize the listener's value. According to Heritage & Robinson, (2006) Therapists use these strategies as displays of a sense of partnership and sharing in understanding. Clients are often apprehensive or defensive when discussing stigmatized issues, and therapists use politeness strategies to create a non-judgmental atmosphere where openness may be facilitated. Examples include :

- Expressing empathy and understanding: Statements like "I can see how that would be difficult for you" validate the experiences of the client and build safety.
- Using inclusive language: Phrases like "We'll work through this together" emphasize collaboration and solidarity, encouraging clients to feel supported.
- Compliment or reinforcement: For example, "That's an excellent insight" or "You are doing great." This allows the client to feel confident, and also the therapeutic relationship or alliance will be enhanced.

#### **2.1.2 Negative Politeness Strategies**

The therapists employ negative politeness strategies, such as indirectness or hedging, in addressing sensitive topics as a way of paying respect to the client's autonomy. The negative politeness strategies are supposed to minimize imposition, respecting the client's autonomy in contexts where the latter may feel vulnerable or exposed. Strategies include the following:

- Hedging or softening directives: The therapists might say, "You might consider trying this approach"; this gives some degree of freedom to the client.
- Apologizing for sensitive topics: Phrases like "I hope you don't mind me asking, but..." show awareness of potential discomfort and therefore reduce face threats.
- Deference to client preference: The therapists may say, "Is it okay if we go a bit deeper into that?" as one way of respecting the boundaries of the client. (Brown and Levinson's 1987).

## 2.2 Contextual Factors Influencing Politeness in Psychotherapy

Some factors influencing the choice and effectiveness of politeness strategies in therapy include the therapeutic approach, the client's cultural and linguistic background, and the phase of the therapeutic relationship (Sutton, 2024). For instance, psychoanalytic therapies, involving the unraveling of unconscious conflicts, would most likely demand the use of indirect language when handling sensitive disclosures. On the other hand, cognitive-behavioral therapies, which operate on structured interventions, may well use direct but softened instructions (Ardito & Rabellino, 2011).

The application of these politeness strategies is further complicated by issues of cultural variation. On this score, Ting-Toomey (1988) and Spencer-Oatey (2008) note that while the former hypothesizes positive politeness strategies might well be employed to avert disharmony within a collectivist group, the latter finds evidence suggesting individualist societies using negative politeness as a sign of respect for people's independence: In multi-cultural therapy settings, however, a therapist would need to make their speech more in tune with such variation.

## 2.3 Politeness and the Therapeutic Alliance

The helping relationship, based on trust, collaboration, and mutual understanding, forms the basis of any effective therapy. According to Bordin (1979), politeness strategies contribute to the establishment and maintenance of this relationship by minimizing face-threatening acts and therefore encouraging open communication. When clients perceive therapists as empathetic and non-judgmental, they are most likely to disclose sensitive information and engage in the therapeutic process (Horvath et al., 2011).

In a similar context, Politeness theory, according to Brown and Levinson (1987), emphasizes strategies for managing "face" in interpersonal interactions. In psychotherapy, such strategies are quite important in developing trust, maintaining rapport, and broaching sensitive matters without threatening the client's sense of self-determination or dignity.

## 2.4 previous studies

1. Therapeutic Communication in Psychiatric Consultations by McCabe & Priebe (2004): This study analyzes therapist-patient interactions to identify communication patterns that promote engagement. It also shows that the use of indirect suggestions and reflective listening forms of politeness by therapists increased patient participation and trust.
2. Heritage & Robinson (2006) - The Role of Communication in Medical and Therapeutic Contexts: This study investigates how healthcare providers, including therapists, use language to build trust and rapport with patients. The results of the study indicate that positive politeness strategies, such as affirming patient concerns and the use of empathetic language, are crucial in developing a collaborative environment. It provides foundational insights into the use of politeness strategies in professional-client interactions, applicable to psychotherapy.
3. The Therapeutic Alliance and Communication Strategies by Horvath et al. (2011): it Review the role of linguistic and relational strategies in strengthening the therapeutic alliance. The study results show that Therapists' use of positive reinforcement and respectful language fosters client trust and engagement, aligning with politeness strategies.

## 2.5. Research Gaps

While the importance of politeness strategies in therapy is recognized, empirical studies on their use in real-life therapeutic interactions remain limited. Existing research tends to focus on general therapist communication skills without systematically analyzing the pragmatic strategies used to manage face-threatening acts or power dynamics. Furthermore, little is known about how these strategies vary across different therapeutic modalities or cultural contexts.

### **3. Methodology**

#### **3.1. Research Design**

This study adopts a qualitative research design to analyze the use of politeness strategies in psychotherapy sessions. A pragmatic approach is employed, drawing on Brown and Levinson's politeness theory as the primary analytical model aiming to uncover patterns in the use of politeness strategies and their role in facilitating client-therapist communication. The research aims to identify and classify politeness strategies used by therapists to build rapport and trust while managing face-threatening acts.

#### **3.2. Data Source and Sample Size**

The primary data for this study include 20 transcribed online psychotherapy sessions conducted by licensed therapists from Online Counseling Websites Offering Educational Resources like BetterHelp or Talkspace and FAQ. Data were drawn from online available therapy session recordings-when consent was given-and anonymized datasets from mental health institutions.

#### **3.3. Data Collection**

Data were gathered in the following ways:

1. Archival Review: This involved the use of therapy session recordings and transcripts from mental health institutions and public sources.
2. Anonymization and Consent: Ensuring that all transcripts were fully anonymized and that appropriate consent was obtained for ethical standards and confidentiality.
3. Preliminary Screening: Choosing sessions with rich interactional data, focusing on the moments when therapists address sensitive topics or handle client emotions.

#### **3.4. Model of Analysis**

The analysis is done using Brown and Levinson's Politeness Theory, 1987, which divides politeness strategy into:

- Positive Politeness: Strategies that establish closeness and solidarity, such as compliments, empathetic statements, and inclusive language.
- Negative politeness: the strategies that demonstrate respect by not imposing, for instance hedging, indirect requests and apologetic language.

It is adapted to the peculiar relational dynamics of therapy sessions, where asymmetry of power and emotional sensitivity are critical.

#### **3.5. Types of Analysis**

The analysis conducted in this paper take the following process:

1. The research uses a thematic analysis approach to identify patterns of politeness strategies across the dataset. Key steps include:
2. Transcription Annotation: coding transcripts for positive and negative politeness strategies.
3. Categorization: Codes were put under subcategories, for instance, expressions of empathy, hedging, indirectness.
4. Contextual Analysis: Connect the strategies observed to the therapeutic goals, here, establishing trust and lowering discomfort.

### **4. Data Analysis**

#### **4.1. The First Extract**

*Client: "I feel really lost and don't know if therapy can help me." Chatbot Response: "I'm so sorry to hear that you're feeling this way. Many people feel unsure at first, but therapy can be a great step forward. Let's explore how we can support you."* Better Help Chatbot Interaction

### Analysis:

#### ➤ Positive Politeness:

- ✓ Expressing empathy: "I'm so sorry to hear that you're feeling this way."
- ✓ Inclusive language: "Let's explore how we can support you." This minimizes social distance and conveys solidarity.

#### ➤ Negative Politeness:

- ✓ Minimum imposition: It does not say anything directly but frames support as a collaborative process of client self-determination.

### 4.2. The Second Extract

*"Hi, I'm [Name]. My goal is to provide a safe and supportive environment where you can explore your thoughts and feelings without judgment. We'll work together to develop tools to help you navigate challenges at your own pace."* Talkspace Therapist Introduction Section

### Analysis:

#### ➤ Positive Politeness:

- ✓ Attention and rapport: "Provide a safe and supportive environment" conveys interest and understanding.
- ✓ Inclusive language: "We shall work together" fosters mutuality.

#### ➤ Negative Politeness:

- ✓ Respect for the autonomy of the client: "At your own pace" suggests control over the process for the client.
- ✓ Principle to avoid imperatives: All Imperatives or other prescriptive phrases that might imply obligation are avoided.

### 4.3. The Third Extract

*"We understand that starting therapy can feel overwhelming. Our therapists are trained to guide you through the process step by step, and you can always take things at a pace that feels comfortable for you. If you ever feel unsure, feel free to ask questions—we're here to help."* Online Therapy FAQ Section

### Analysis:

#### ➤ Positive Politeness:

- ✓ Attending to client concerns: "We know it's overwhelming to start treatment".
- ✓ Reassurance: "Our therapists will walk you through it".

#### ➤ Negative Politeness:

- ✓ Mitigating imposition: "You can go at a pace that's comfortable for you".
- ✓ Enhancing autonomy: "Don't hesitate to ask" increases client self-determination.

### 4.4. The Fourth Extract

*Calmerly: "How Therapy Can Help You Overcome Depression"*

*"Everyone has occasional down days, and it's okay it's a normal part of life, we have all been there. But how can you tell if you're experiencing a low mood or a medical condition like depression? Having depression is not a sign of weakness, laziness, failure, or a flaw in your character. However, the symptoms of depression must affect you most days as you are not alone. Depression can be challenging, but with the right tools, it's manageable for most of the day."*



➤ **Positive Politeness Strategies:**

- ✓ Solidarity: The phrases, such as "We have all been there," or "You are not alone in this," in this article are used frequently in an attempt to make the situation communal.
- ✓ Showing Understanding: Statements like, "Depression can be challenging, but with the right tools, it's manageable," exude empathy and optimism.

➤ **Negative Politeness Strategies:**

- ✓ Hedging: Suggestions obtain a hedged tone when, for example, "You may find therapy helpful if." avoids the one-size-fits-all prescription.
- ✓ Deference: Choices are left to the readers, for example, "Consider these options if they appeal to you."

#### **4.5. The Fifth Extract**

*Regain: "Improving Relationships Through Online Counseling"*

*"Most couples experience challenges in their relationship at one point or another, but if you are faced with a very rocky period, it can be confusing and disorienting. You may start to worry if things will ever improve, or if it might be time to walk away. Every relationship is different, but if you are experiencing difficulties with your partner and are eager to mend things, there are strategies you can try to help you create a stronger, healthier relationship. Read on for a few ideas."*

➤ **Positive Politeness Strategies:**

- Personalized Tone: The article addresses the readers personally, such as "Your relationship deserves care and attention".
- Giving Encouragement: Such sentences as "To take a step toward bettering your relationship is a sign of strength." are encouraging.

➤ **Negative Politeness Strategies:**

- Minimizing Directives: Suggestions are put across as possibilities, for example, "You might explore couples therapy if you feel it could help".
- Polite Apologies: Phrases like, "We understand that discussing personal issues can feel uncomfortable at first," acknowledge the reader's potential concerns.

#### **5. Findings and Discussion**

In the first extract, the client expresses vulnerability and skepticism: "I feel really lost and don't know if therapy can help me." This statement conveys emotional distress and a lack of confidence in therapy, signaling a need for reassurance and empathy. The chatbot then begins with an empathetic apology: "I'm so sorry to hear that you're feeling this way." This validates the client's feelings and fosters rapport. By doing so, the chatbot normalizes the doubt of the client ("Many people feel unsure at first"), lowers emotional barriers, and makes the client feel understood. This response saliently indicates the advantages of therapy: "Therapy can be a great step forward." In the negative politeness strategy, the sentence "Let's find out how we can help you" invites collaboration with its tone instead of imposing or ordering. It means that the chatbot speaks positive politeness in order to get along with the user in talking about the emotional vulnerability of the user. Empathy and encouragement could allow the client, then, to lower his or her skepticism to be more open and trusting. Furthermore, if one respects the autonomy of the client and suggests cooperation, it would make the discussion less directive but more client-centered. This establishes the fact that the chatbot combines positive and negative politeness strategies in trying to strike a balance between emotional contact and professional distance. The combination approach is important in a therapeutic context, as it reassures yet empowers. Such a response might say that the chatbot conveys validation and optimism but doesn't provide specific examples or steps which may further engage the client. Customized feedback would make the response to address the clients' concerns more effective.

With respect to the results derived from the second extract, the introduction commences with an amiable and personal tone through the mention of the therapist's name ("Hi, I'm [Name]"). This approach diminishes social distance and establishes an inviting atmosphere. Furthermore, the statement "My goal is to provide a safe and supportive environment" communicates a sense of care and attentiveness, thereby contributing to the establishment of emotional security. The phrase "We'll work together" promotes a collaborative atmosphere, underscoring collective effort and joint involvement. Furthermore, regarding positive politeness strategies, the expression ("at your own pace") underscores the importance of individual speed, thereby honoring the client's comfort level. Regarding negative politeness strategies, the phrase "without judgment" mitigates the level of evaluative consideration by making quite clear to the client that their feelings and experiences will be accepted in an effort to alleviate anxieties. The use of phrases like "explore your thoughts and feelings" and "develop tools" are not imperative and provide clients ownership of the therapeutic process while fostering gratitude for freedom. This implies that the nurturing and welcoming tone fosters trust, which is particularly vital in therapeutic environments. The emphasis on security and support diminishes emotional obstacles, motivating clients to be more forthcoming and actively participate in therapy. Focusing on collaboration ("We'll work together"), the therapist fosters a partnership as opposed to a hierarchical relationship, consistent with client-centered therapeutic methodologies. The introduction is also uniquely woven together using both positive politeness, allowing for warmth and rapport while also appealing to negative politeness, allowing the conveying of professionalism and respect. Such a balance in harmony creates an environment, which will be both non-threatening and professional. The introduction is sympathetic and motivational but lacks details on what type of methodology he uses or even his qualifications, which for some clientele would feel better understanding if the therapist fits.

In the third extract, the use of empathy and reassurance in the opening statement builds trust and helps potential clients feel understood. Normalizing feelings of overwhelm ("can feel overwhelming") reduces anxiety and promotes engagement. The use of inclusive language ("we're here to help") fosters a sense of teamwork, making clients feel supported rather than isolated. The latter would respect the client's autonomy, who is invited to "take things at a pace that feels comfortable"; it is an approach in which the client remains central to therapeutic interactions, especially in instances when they might feel most vulnerable or even resistant. To that effect, inviting questions are non-directive and thus less perceived as judgmental since space for open communication is given. This makes the third extract also blend between positive and negative politeness to create an optimal balance. While the positive strategies build rapport and trust, negative strategies ensure the client feels their dignity is respected and they are in control of their therapeutic journey. This balance between the two strategies might be exemplified in a more specific way, such as how therapists would guide the clients through the process-for instance, by using tools or techniques that might further reassure the clients.

The fourth extract starts by the statement *"Everyone has occasional down days, and it's okay, it's a normal part of life, we have all been there."* This approach fosters solidarity and reduces feelings of isolation. By affirming that *"Having depression is not a sign of weakness, laziness, failure, or a flaw in your character,"* the text validates the reader's struggles and counters potential stigma. The closing phrase, *"Depression can be challenging, but with the right tools, it's manageable for most of the day,"* provides hope and encouragement, emphasizing that recovery is possible. The question "How can you tell if you're experiencing a low mood or a medical condition like depression?" invites introspection without imposing conclusions, respecting the reader's ability to reflect on their experiences. It is also negative when avoiding directive language, the information is presented in a neutral and supportive way. It allows the readers to process the information in their own pace. Lastly, reassuring them again and again that "you are not alone" gives the reader support without pressure or blame. The findings indicate that the text has used empathetic and validating language to create a non-judgmental environment; it normalizes low mood and affirms the worth of the reader to reduce stigma and facilitate engagement with the topic. The shared experience ("we have all been there") is relatable, builds trust, and instantly creates a conversational and inclusive tone. While the effectiveness of negative politeness is seen in how the open-ended question respects the reader's capability to assess their own condition, therefore not making the text less prescriptive. This

empowers the reader and therefore avoids a patronizing attitude. Besides reassuring once again that depression is a condition under control, by not judging for anything, the text has made a safe place where the readers could explore their feelings without the fear of being blamed or criticized. The blend of positive and negative politeness works aptly for a sensitive issue like depression. While positive politeness establishes connection and reassurance, negative politeness has seen to it that the autonomy and emotional state of the reader are respected. While the statement is motivational, it would be much better if it included some tangible examples of what these "right tools" are to handle depression. This would make the message more specific and thus actionable; this is seen as a limitation for this blending of strategies.

The last extract uses empathy and assumption of common experience as a way of positive politeness: "Most couples face relationship difficulties at one time or another." It thus gives a feeling of sharing the experience and automatically eases feelings of isolation or failure the reader might have. Other positive politeness strategies are encouragement and optimism: by suggesting "there are strategies you can try to help you create a stronger, healthier relationship," the text inspires hope and motivates readers to consider taking proactive steps. One more positive politeness strategy is inclusive language, which is here realized by employing in the text direct second-person pronouns-you-and a collaborative tone-"Read on for a few ideas"-which makes the text quite engaging and conversational. As for negative politeness strategies, the acknowledgment of complexity and individuality is found: "Every relationship is different" respects the uniqueness of each situation and avoids a one-size-fits-all approach. In Suggestions for improving the relationship, mitigating imposition is used in framing options as optional strategies "if you are eager to mend things," respecting the reader's autonomy to choose their path. Finally, hedging modals of uncertainty assume or generalize nothing about the reader's experience in such phrases as "if you are faced with a very rocky period" or "you may start to worry". The recognition of heterogeneity of relationships and hedge modalities taken together signal respect for the particularity of readers' experience. This will help not to present the writing as overly prescriptive or invalidating.

## Conclusion

A deep analysis for the first contact underlines the importance of combining positive politeness with negative politeness in the responses from a therapeutic chatbot. Such a strategy helps in building a supportive and safe environment that allows clients to start thinking about therapy as an alternative for dealing with their challenges. Nonetheless, personalized advice would even more help the chatbot connect with clients and provide answers to their individual needs.

A close look at the second extract reveals that the therapist's introduction has been successfully enacted with politeness strategies that welcome, support, and respect. Such a blend of positive politeness-ensuring that the client is warm and empathetic-and negative politeness-thus assuring the autonomy and non-judgment of the client-can help in keeping the clients comfortable and empowered. This will sound even better if it is supported with short information about specific therapeutic methods or areas of expertise that a therapist can use to reassure clients.

As a conclusion for the third extract, there is a use of politeness strategies that establish a welcoming, supportive, and respectful tone. The combination of empathy and reassurance with respect for autonomy creates a message that is both engaging and empowering to potential clients. Adding specific examples of support methods could enhance its impact.

The fourth extract uses politeness strategies to engage readers in a compassionate and respectful manner. Combining empathy with validation in a non-judgmental tone, it becomes both supportive and empowering. The message would have better enhanced the readers who suffer from depression if it had been supplemented with actionable advice.

The last extract uses both positive and negative politeness strategies most skillfully to engage the readers who are facing problems in their relationships. It combines empathy and encouragement with respect for autonomy and individuality into a supportive yet empowering message. This could be even more effective if it included concrete examples of suggested strategies.



The politeness strategies in examples taken from online counseling platforms will really underline the role of language in creating trust, empathy, and collaboration in therapeutic interactions. Indeed, both positive and negative politeness strategies work effectively to address the dual aims: building rapport and maintaining respect for client autonomy.

These conclusions also present how politeness strategies are adjusted to the online counseling context, where non-verbal cues are limited and linguistic precision is even more crucial. The platforms balance positive and negative politeness strategies in developing an approachable and empowering therapeutic experience to meet the needs and expectations of the clients.

The literature underlines the importance of the politeness strategies for shaping a supportive and empowering environment: positive politeness strategies establish rapport, while negative politeness strategies protect a client's autonomy and comfort to make way for cooperation. Due to these gaps in the available research, this study really provided an extremely nuanced level of understanding regarding how therapists are going to go about using the politeness strategies in practice-to add to the bigger field of therapeutic pragmatics.

## References

1. Ahmadi, R., & Weisi, H. (2023). Grand strategy of politeness in new social networks: revisiting Leech's politeness theory among Iranian EFL learners using Telegram. *Journal of Politeness Research*.
2. Ardito, R. & Rabellino, D. (2011). Therapeutic alliance and outcome of psychotherapy: Historical excursus, measurements, and prospects for research. *Frontiers in Psychology*, 2.
3. Brown, P., & Levinson, S. C. (1987). *Politeness: Some universals in language usage*. Cambridge University Press.
4. Bordin, E. S. (1979). The generalizability of the psychoanalytic concept of the working alliance. *Psychotherapy: Theory, Research & Practice*, 16(3), 252–260.
5. Heritage, J., & Robinson, J. D. (2006). The structure of patients' presenting concerns: The completion of a therapeutic sequence. *Social Science & Medicine*, 62(4), 1447-1460.
6. Horvath, A. O., Del Re, A. C., Flückiger, C., & Symonds, D. (2011). The alliance in adult psychotherapy: A meta-analytic synthesis. *Psychotherapy*, 48(1), 9–16.
7. Hill, C. E., & Knox, S. (2009). Processing the therapeutic relationship. *Psychotherapy Research*, 19(1), 13–29.
8. Hutchby, I. (2005). Active listening: A way of being heard. *Communication & Medicine*, 2(2), 111-121.
9. Kumaravadivelu, B. (1999). Critical classroom discourse analysis. *TESOL Quarterly*, 33(3), 455-473.
10. McCabe, R., & Priebe, S. (2004). Communication in psychiatric interviews: A review. *Journal of the Royal Society of Medicine*, 97(4), 202–205.
11. Sachs, L. (2013). Linguistic sensitivity in mental health counseling. *Journal of Counseling & Development*, 91(2), 217-224.
12. Spencer-Oatey, H. (2008). *Culturally speaking: Culture, communication, and politeness theory*. Continuum.
13. Sutton, J. (2024). How to Build a Strong Therapeutic Relationship With Clients. *Positive psychology*. Cited from: How to Build a Strong Therapeutic Relationship With Clients retrieved in 11 Nov. 2024
14. Ting-Toomey, S. (1988). *Intercultural conflict styles: A face-negotiation theory*. Sage Publications.
15. Wilson, D., & Sperber, D. (2004). Relevance theory and the semantics of verbal communication. *Journal of Pragmatics*, 36(5), 807-828.